



Department of Medical Assistance Services
600 East Broad Street, Suite 1300
Richmond, Virginia 23219

<http://www.cns.state.va.us/dmas/>

MEDICAID MEMORANDUM

TO: All Medicaid and SLH providers participating in the Virginia Medical Assistance Program and Health Maintenance Organizations providing services to Virginia Medicaid Recipients

FROM: Dennis G. Smith, Director
Department of Medical Assistance Services

MEMO Special

DATE 8/30/2000

SUBJECT: Availability of Provider Manuals on the Internet
Suppression of Paper Copies of Manuals

The Department of Medical Assistance Services (DMAS) issues 28 provider manuals concerning Medicaid policy and procedures and one manual concerning State and Local Hospitalization (SLH). These manuals set forth billing instructions for participating Medicaid, CMSIP, and SLH providers; set forth participation requirements imposed upon providers; explain recipient eligibility rules and policies; identify covered and non-covered services, as well as the limitations on coverage; and set forth utilization review and control procedures. All providers must comply with the requirements set forth in the provider manuals.

Availability of Provider Manuals on the Internet

As manuals are issued, reissued, or updated, all providers, except those who have requested the suppression of mailings under the procedure below, will receive hard copies (paper copies) of the manuals. However, the quickest way to obtain manuals is via the Internet. The provider manuals listed below are available on the Internet now, free of charge. You may view, search, print, or download the manuals directly from the Internet.

Go to <http://www.cns.state.va.us/dmas/> and click on "Provider Manuals." The website contains instructions about how to search, view, or print the manuals.

a. Provider Manuals Available on the Internet now:

Baby Care
Community Mental Health Rehabilitative Services
Dental
Durable Medical Equipment and Supplies

Freestanding Renal Dialysis Clinic
 Home Health
 Hospice
 Independent Laboratory
 Mental Health Clinic
 Nursing Home
 Nursing Home Preadmission Screening
 Pharmacy
 Physician
 Podiatry
 Prosthetic Devices
 Psychiatric Services
 Rehabilitation
 School Division
 State and Local Hospitalization (SLH)
 Transportation
 Vision Services

b. Provider Manuals to be released by Fall of 2000:

AIDS Waiver
 Assisted Living
 Consumer Directed Personal Attendant Services
 Elderly Case Management
 Elderly & Disabled Waiver
 Hospital
 Mental Retardation Community Services
 Technology Assisted Waiver

Suppression of Paper Copies of Provider Manuals

DMAS is required to make copies of provider manuals and other documents pertaining to the administration of Virginia Medicaid available to all participating providers. One copy of each mailing is automatically disseminated free of charge in paper format to every Medicaid provider based on the individual provider number assigned to the provider. This system of distribution may create unnecessary multiple mailings to large practice groups or to those providers who have more than one provider number.

To suppress receipt of this paper information, please complete the enclosed Mailing Suspension Request form and mail it to our fiscal agent, at the address below. The First Health Services Corporation Provider Enrollment Unit will process the form, and the provider named on the form will no longer receive publications from Virginia Medicaid. To resume the mailings, contact:

First Health VMAP Provider Enrollment Unit	804-270-5105	
P.O. Box 26803	1-888-829-5383	(in state toll-free)
Richmond, VA 23261	804-270-7027	(fax)

For a provider group to continue to receive one copy of Medicaid Program information, it is important that a Mailing Suspension Request form not be completed for every Medicaid provider number. At least one Medicaid provider number in the group should be left on the distribution lists (i.e., not be suppressed).

“HELPLINE”

The “HELPLINE” is available Monday through Friday from 8:30 a.m. to 4:30 p.m., except State holidays, to answer questions. The “HELPLINE” numbers are:

786-6273	Richmond Area
1-800-552-8627	All Other Areas

Please remember that the “HELPLINE” is for provider use only.

Attachment (1)

DEPARTMENT OF MEDICAL ASSISTANCE SERVICES**MAILING SUSPENSION REQUEST**

Medicaid Provider Number: _____

Provider Name: _____

I do not wish to receive paper copies of Medicaid memoranda, forms, or manual updates under the Medicaid provider number given above because the information is available to me under another Medicaid provider number.

Provider Signature: _____

Date: _____

Please return this completed form to:

First Health VMAP Provider Enrollment Unit
P.O. Box 26803
Richmond, VA 23261